

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Western District Of Virginia

Case number (if known): \_\_\_\_\_

Chapter you are filing under:

Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

Check if this is an amended filing

Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself**

**About Debtor 1:**

**1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Anthony

First name

Wayne

Middle name

Silvious

Last name

Suffix (Sr., Jr., II, III)

**About Debtor 2 (Spouse Only in a Joint Case):**

Debra

First name

Sue

Middle name

Silvious

Last name

Suffix (Sr., Jr., II, III)

**2. All other names you have used in the last 8 years**

Include your married or maiden names.

Tony

First name

Middle name

Silvious

Last name

First name

Middle name

Last name

First name

Middle name

Last name

First name

Middle name

Last name

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**

xxx - xx - 6 4 5 7

OR

**9** xx - xx - \_\_\_\_\_

xxx - xx - 3 3 5 9

OR

**9** xx - xx - \_\_\_\_\_

Debtor 1 Anthony Wayne Silvius  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

<b>About Debtor 1:</b>		<b>About Debtor 2 (Spouse Only in a Joint Case):</b>	
<b>4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years</b> <small>Include trade names and <i>doing business as</i> names</small>		<input checked="" type="checkbox"/> I have not used any business names or EINs.	
<small>Business name</small> <small>Business name</small> <small>EIN</small> <small>EIN</small>		<small>Business name</small> <small>Business name</small> <small>EIN</small> <small>EIN</small>	
<b>5. Where you live</b>			
<small>1212 Quicksburg Road</small> <small>Number Street</small> <small> </small>		<small>Number Street</small> <small> </small>	
<small>Quicksburg</small> <small>City</small>		<small>VA</small> <small>State</small>	<small>22847</small> <small>ZIP Code</small>
<small>SHENANDOAH</small> <small>County</small>			
<b>If your mailing address is different from the one above, fill it in here.</b> Note that the court will send any notices to you at this mailing address.			
<small>Number Street</small> <small>P.O. Box</small> <small> </small>		<small>Number Street</small> <small>P.O. Box</small> <small> </small>	
<small>City</small> <small>State</small> <small>ZIP Code</small>		<small>City</small> <small>State</small> <small>ZIP Code</small>	
<b>6. Why you are choosing this district to file for bankruptcy</b>		<b>Check one:</b>	
<input checked="" type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		<input checked="" type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	
<input type="checkbox"/> I have another reason. Explain. <small>(See 28 U.S.C. § 1408.)</small>		<input type="checkbox"/> I have another reason. Explain. <small>(See 28 U.S.C. § 1408.)</small>	
<small> </small> <small> </small> <small> </small>		<small> </small> <small> </small> <small> </small>	

Debtor 1 Anthony Wayne Silvius  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 2: Tell the Court About Your Bankruptcy Case**

**7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

**8. How you will pay the fee**

**I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

**I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

**I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

**9. Have you filed for bankruptcy within the last 8 years?**

No

Yes. District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

**10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**

No

Yes. Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
MM / DD / YYYY

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
MM / DD / YYYY

**11. Do you rent your residence?**

No. Go to line 12.

Yes. Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **Anthony Wayne Silvius**  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

**12. Are you a sole proprietor of any full- or part-time business?**

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

No. Go to Part 4.

Yes. Name and location of business

Name of business, if any \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

*Check the appropriate box to describe your business:*

Health Care Business (as defined in 11 U.S.C. § 101(27A))  
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
 Stockbroker (as defined in 11 U.S.C. § 101(53A))  
 Commodity Broker (as defined in 11 U.S.C. § 101(6))  
 None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

No

Yes. What is the hazard? \_\_\_\_\_

If immediate attention is needed, why is it needed? \_\_\_\_\_

Where is the property? \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Debtor 1

Anthony Wayne Silvius

First Name Middle Name

Last Name

Case number (if known) \_\_\_\_\_

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling****15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:***You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):***You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Anthony Wayne Silvius  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 6: Answer These Questions for Reporting Purposes****16. What kind of debts do you have?**16a. **Are your debts primarily consumer debts?** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

No. Go to line 16b.  
 Yes. Go to line 17.

16b. **Are your debts primarily business debts?** Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

No. Go to line 16c.  
 Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.

**17. Are you filing under Chapter 7?** No. I am not filing under Chapter 7. Go to line 18. Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

No  
 Yes

**18. How many creditors do you estimate that you owe?**

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

**19. How much do you estimate your assets to be worth?**

<input checked="" type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

**20. How much do you estimate your liabilities to be?**

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

**Part 7: Sign Below****For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 /s/Anthony Wayne Silvius

Signature of Debtor 1

 /s/Debra Sue Silvius

Signature of Debtor 2

Executed on 06/11/2019  
MM / DD / YYYYExecuted on 06/11/2019  
MM / DD / YYYY

Debtor 1 Anthony Wayne Silvius  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**For your attorney, if you are represented by one**

**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/Douglas W. Harold, Jr. \_\_\_\_\_ Date 06/11/2019  
Signature of Attorney for Debtor MM / DD / YYYY

Douglas W. Harold, Jr.

Printed name

Douglas W. Harold, Jr., Attorney at Law.

Firm name

1114 Fairfax Pike, Suite 10

Number Street

White Post

City

VA

State

22663-

ZIP Code

Contact phone (540) 869-0040

Email address douglasharold@verizon.net

19533

Bar number

VA

State

## Fill in this information to identify your case:

Debtor 1	<b>Anthony Wayne Silvious</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Debra Sue Silvious</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>WESTERN DISTRICT OF VIRGINIA</b>			
Case number (If known)			

Check one box only as directed in this form and in Form 122A-1Supp:

1. There is no presumption of abuse.

2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).

3. The Means Test does not apply now because of qualified military service but it could apply later.

 Check if this is an amended filing

## Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

**Part 1: Calculate Your Current Monthly Income**

## 1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

Married and your spouse is NOT filing with you. You and your spouse are:

- Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
- Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	<b>Column A Debtor 1</b>	<b>Column B Debtor 2 or non-filing spouse</b>
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$2,318.32	\$0.00
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$0.00	\$0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$0.00	\$0.00
5. Net income from operating a business, profession, or farm Gross receipts (before all deductions)	\$ _____	\$ _____
Ordinary and necessary operating expenses	- \$ _____	- \$ _____
Net monthly income from a business, profession, or farm	\$0.00	\$0.00
	<b>Debtor 1</b>	<b>Debtor 2</b>
Gross receipts (before all deductions)	\$ _____	\$ _____
Ordinary and necessary operating expenses	- \$ _____	- \$ _____
Net monthly income from a business, profession, or farm	\$0.00	\$0.00
	<b>Debtor 1</b>	<b>Debtor 2</b>
Gross receipts (before all deductions)	\$ _____	\$ _____
Ordinary and necessary operating expenses	- \$ _____	- \$ _____
Net monthly income from rental or other real property	\$0.00	\$0.00
	<b>Debtor 1</b>	<b>Debtor 2</b>
Gross receipts (before all deductions)	\$ _____	\$ _____
Ordinary and necessary operating expenses	- \$ _____	- \$ _____
Net monthly income from rental or other real property	\$0.00	\$0.00
7. Interest, dividends, and royalties	\$0.00	\$0.00

Debtor 1 **Anthony Wayne Silvius**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Column A**  
**Debtor 1**

**Column B**  
**Debtor 2 or**  
**non-filing spouse**

**8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 

For you ..... \$ 0.00  
 For your spouse ..... \$ 0.00

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.

\$ 0.00 \$ 0.00

**10. Income from all other sources not listed above.** Specify the source and amount.

Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

Adoption subsidy for 18 year old daughter \_\_\_\_\_

\$ 0.00 \$ 990.00

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Total amounts from separate pages, if any.

+ \$ 0.00 + \$ 0.00

\$ 2,318.32 + \$ 990.00

= \$ 3,308.32

Total current monthly income

**11. Calculate your total current monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

**Part 2: Determine Whether the Means Test Applies to You**

**12. Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11. ....  Copy line 11 here → \$ 3,308.32

Multiply by 12 (the number of months in a year).

12b. The result is your annual income for this part of the form. 12b. \$ 39,699.84

**13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

Virginia

Fill in the number of people in your household.

6

Fill in the median family income for your state and size of household. .... 13. \$ 119,551.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**14. How do the lines compare?**

14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*  
 Go to Part 3.

14b.  Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.*  
 Go to Part 3 and fill out Form 122A-2.

**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

 /s/Anthony Wayne Silvius

Signature of Debtor 1

Date 06/11/2019  
 MM / DD / YYYY

 /s/Debra Sue Silvius

Signature of Debtor 2

Date 06/11/2019  
 MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill in this information to identify your case:

Debtor 1	<b>Anthony Wayne Silvius</b>	
	First Name	Middle Name
	Last Name	
Debtor 2	<b>Debra Sue Silvius</b>	
(Spouse, if filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the: <b>Western District Of Virginia</b>		
Case number (If known)		

Check if this is an amended filing

## Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.

Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Hold Secured Claims

- For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <b>Mr. Cooper</b>	<input checked="" type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt: <b>Former residence</b>	_____	
Creditor's name: <b>OneMain Financial</b>	<input checked="" type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt: <b>2004 Chevrolet Impala with 220,000 miles., 2008 Chevrolet Uplander # 1 with 179,000 miles.</b>	_____	
Creditor's name: <b>OneMain Financial</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]: <b>will continue w/ payments per contract.</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt: <b>2008 Chevrolet Uplander # 2 with 96,000 miles.</b>	_____	
Creditor's name:	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt:	_____	

Your name

**Anthony Wayne Silvius**

First Name

Middle Name

Last Name

Case number (If known)

**Part 2:**

**List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

**Describe your unexpired personal property leases**

**Will the lease be assumed?**

Lessor's name:

No

Description of leased property:

Yes

**Part 3:**

**Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

**X** /s/Anthony Wayne Silvius

Signature of Debtor 1

Date 06/11/2019  
MM / DD / YYYY

**X** /s/Debra Sue Silvius

Signature of Debtor 2

Date 06/11/2019  
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	Anthony	Wayne	Silvious
	First Name	Middle Name	Last Name
Debtor 2	Debra	Sue	Silvious
(Spouse, if filing)	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: Western District of Virginia

Case number  
(If known) \_\_\_\_\_

Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before**

1. What is your current marital status?

Married  
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:

Dates Debtor 1  
lived there

Debtor 2:

Dates Debtor 2  
lived there

Same as Debtor 1

Same as Debtor 1

80 Quicksburg Mill Lane

Number Street

From 01/01/16

From \_\_\_\_\_

To 02/17/19

To \_\_\_\_\_

Quicksburg VA 22847

City

State ZIP Code

City

State ZIP Code

Same as Debtor 1

Same as Debtor 1

Number Street

From \_\_\_\_\_

From \_\_\_\_\_

To \_\_\_\_\_

Number Street

To \_\_\_\_\_

City

State ZIP Code

City

State ZIP Code

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 Anthony Wayne Silvius  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 2: Explain the Sources of Your Income****4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

 No Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$11,770.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$_____
<b>For last calendar year:</b> (January 1 to December 31, 2018) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$27,820.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$_____
<b>For the calendar year before that:</b> (January 1 to December 31, 2017) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$25,585.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$_____

**5. Did you receive any other income during this year or the two previous calendar years?**Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

 No Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>		\$_____	<b>See Attachment 1</b>	\$9,948.00
		\$_____		\$_____
		\$_____		\$_____
<b>For last calendar year:</b> (January 1 to December 31, 2018) YYYY		\$_____	<b>See Attachment 2</b>	\$23,082.00
		\$_____		\$_____
		\$_____		\$_____
<b>For the calendar year before that:</b> (January 1 to December 31, 2017) YYYY		\$_____	<b>See Attachment 3</b>	\$23,082.00
		\$_____		\$_____
		\$_____		\$_____

Debtor 1 Anthony Wayne Silvius  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

## Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

## 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
OneMain Financial Creditor's Name	04/04/19	\$1,362.00	\$11,185.22	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
1066 Hisey Ave # 103 Number Street	05/06/19			
	06/04/19			
Woodstock VA 22664 City State ZIP Code				
Creditor's Name		\$	\$	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street				
City State ZIP Code				
Creditor's Name		\$	\$	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street				
City State ZIP Code				

Debtor 1 Anthony Wayne Silvius  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

## 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

 No Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		

## 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

 No Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		

**Debtor 1** Anthony Wayne Silvious  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

## **Part 4: Identify Legal Actions, Repossessions, and Foreclosures**

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title _____ _____		Court Name _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____		Number Street _____	
		City _____ State _____ ZIP Code _____	
Case title _____ _____		Court Name _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____		Number Street _____	
		City _____ State _____ ZIP Code _____	

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

Describe the property	Date	Value of the property
Creditor's Name _____	_____	\$ _____

Number Street	<b>Explain what happened</b>
	<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.
City	State ZIP Code

Describe the property	Date	Value of the property
		\$ _____

Number	Street	<b>Explain what happened</b>
		<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.
City	State	ZIP Code

Debtor 1 **Anthony Wayne Silvius**  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?** No Yes. Fill in the details.Creditor's Name  
Number Street  
\_\_\_\_\_

Describe the action the creditor took	Date action was taken	Amount
_____	_____	\$ _____

City State ZIP Code

Last 4 digits of account number: XXXX-\_\_\_\_\_

**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?** No Yes**Part 5: List Certain Gifts and Contributions****13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?** No Yes. Fill in the details for each gift.Gifts with a total value of more than \$600 per person  
Person to Whom You Gave the Gift  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
City State ZIP Code  
Person's relationship to you \_\_\_\_\_

Describe the gifts	Dates you gave the gifts	Value
_____	_____	\$ _____
_____	_____	\$ _____

Gifts with a total value of more than \$600 per person  
Person to Whom You Gave the Gift  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
City State ZIP Code  
Person's relationship to you \_\_\_\_\_

Describe the gifts	Dates you gave the gifts	Value
_____	_____	\$ _____
_____	_____	\$ _____

Debtor 1 Anthony Wayne Silvius  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?** No Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
<u>See Attachment 4</u> Charity's Name	Weekly offerings of \$25 for past two years, total approximately = \$2,500	_____	\$ _____
<u>Edinburg VA</u> City State ZIP Code		_____	\$ _____

**Part 6: List Certain Losses****15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?** No Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	_____	\$ _____

**Part 7: List Certain Payments or Transfers****16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

 No Yes. Fill in the details.

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<u>See Attachment 5</u> Person Who Was Paid	<u>03/22/19</u>	\$ <u>890.00</u>
<u>1114 Fairfax Pike, Suite 10</u> Number Street		\$ _____
<u>White Post VA 22663-</u> City State ZIP Code		\$ _____
<u>douglasharold@verizon.net</u> Email or website address		
<u>Person Who Made the Payment, if Not You</u>		

Debtor 1 **Anthony Wayne Silvius**  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

Description and value of any property transferred			Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$ _____
Number Street				\$ _____
City State ZIP Code				
Email or website address				
Person Who Made the Payment, if Not You				

**17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

 No Yes. Fill in the details.

Description and value of any property transferred			Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$ _____
Number Street				\$ _____
City State ZIP Code				

**18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

 No Yes. Fill in the details.

Description and value of property transferred		Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer			
Number Street			
City State ZIP Code			
Person's relationship to you			
Person Who Received Transfer			
Number Street			
City State ZIP Code			
Person's relationship to you			

Debtor 1 Anthony Wayne Silvius  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No  
 Yes. Fill in the details.

Description and value of the property transferred	Date transfer was made
Name of trust _____	_____
_____	_____

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No  
 Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution _____	XXXX-_____	<input type="checkbox"/> Checking _____ <input type="checkbox"/> Savings _____ <input type="checkbox"/> Money market _____ <input type="checkbox"/> Brokerage _____ <input type="checkbox"/> Other _____	\$ _____
Number Street _____	XXXX-_____	<input type="checkbox"/> Checking _____ <input type="checkbox"/> Savings _____ <input type="checkbox"/> Money market _____ <input type="checkbox"/> Brokerage _____ <input type="checkbox"/> Other _____	\$ _____
City _____ State _____ ZIP Code _____	XXXX-_____	<input type="checkbox"/> Checking _____ <input type="checkbox"/> Savings _____ <input type="checkbox"/> Money market _____ <input type="checkbox"/> Brokerage _____ <input type="checkbox"/> Other _____	\$ _____

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No  
 Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution _____	Name _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Number Street _____	Number Street _____	
City _____ State _____ ZIP Code _____	_____	

Debtor 1 **Anthony Wayne Silvius**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

No

Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility	Name	<input type="checkbox"/> No <input type="checkbox"/> Yes
Number Street	Number Street	
City State ZIP Code		
City	State	ZIP Code

**Part 9: Identify Property You Hold or Control for Someone Else**

**23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**

No

Yes. Fill in the details.

Where is the property?	Describe the property	Value
Owner's Name		\$ _____
Number Street	Number Street	
City State ZIP Code		
City	State	ZIP Code

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

**24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?**

No

Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	_____
Number Street	Number Street	
City State ZIP Code		
City	State	ZIP Code

Debtor 1 Anthony Wayne Silvius  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

## 25. Have you notified any governmental unit of any release of hazardous material?

 No Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
		City	State ZIP Code
City	State	ZIP Code	

## 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

 No Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title		
Court Name		<input type="checkbox"/> Pending
Number Street		<input type="checkbox"/> On appeal
Case number		<input type="checkbox"/> Concluded
City	State ZIP Code	

**Part 11: Give Details About Your Business or Connections to Any Business**

## 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

 No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business.

Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street		EIN: _____
City		Dates business existed
State ZIP Code		From _____ To _____
Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street		EIN: _____
City		Dates business existed
State ZIP Code		From _____ To _____

Debtor 1	Anthony Wayne Silvius First Name      Middle Name      Last Name	Case number (if known) _____
Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street	Name of accountant or bookkeeper	EIN: _____ - _____ Dates business existed
City      State      ZIP Code		From _____ To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Date issued

Name \_\_\_\_\_  
MM / DD / YYYY  
Number Street  
City      State      ZIP Code

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/Anthony Wayne Silvius

Signature of Debtor 1

Date 06/11/2019

/s/Debra Sue Silvius

Signature of Debtor 2

Date 06/11/2019

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_ . Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

**Attachment**  
**Debtor: Anthony Wayne Silvious Case No:**

**Attachment 1**

Soc Security & adoption subsidy

**Attachment 2**

Soc Security & adoption subsidy

**Attachment 3**

Soc Security & adoption subsidy

**Attachment 4**

Wakeman's Grove Church of the Brethren

**Attachment 5**

Douglas W. Harold, Jr., Attorney at Law.



Debtor 1 Anthony Wayne Silvious

Case number (if known) \_\_\_\_\_

1.3. Street address, if available, or other description \_\_\_\_\_

**What is the property?** Check all that apply.

Single-family home  
 Duplex or multi-unit building  
 Condominium or cooperative  
 Manufactured or mobile home  
 Land  
 Investment property  
 Timeshare  
 Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property? Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

County \_\_\_\_\_

**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

 **Check if this is community property (see instructions)**

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. ..... →

\$76,100.00

**Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

## 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No  
 Yes

3.1. Make: Chevrolet  
 Model: Impala  
 Year: 2004  
 Approximate mileage: 220,000

Other information:

Fair shape - collateral for OneMain loan # 9008

**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property? Current value of the portion you own?**

\$500.00 \$500.00

If you own or have more than one, describe here:

3.2. Make: Chevrolet  
 Model: Uplander # 2  
 Year: 2008  
 Approximate mileage: 96,000

Other information:

Excellent shape - owe \$2,273.73 - OneMain loan # 4270

**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property? Current value of the portion you own?**

\$3,500.00 \$3,500.00

Debtor 1 Anthony Wayne Silvious  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

3.3. Make: Ford  
Model: F150 P/U  
Year: 1988  
Approximate mileage: 180,000Other information:  
Fair shape - no liens**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?** \$500.00 **Current value of the portion you own?** \$500.003.4. Make: Chevrolet  
Model: 1500 P/U  
Year: 1990  
Approximate mileage: 165,000Other information:  
Fair shape - no liens**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?** \$800.00 **Current value of the portion you own?** \$800.00**See Attachment 1: Additional Cars, Vans, Trucks, Tractors, Sport Utility Vehicles, and Motorcycles****4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No  
 Yes

4.1. Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Year: \_\_\_\_\_Other information:  
\_\_\_\_\_**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?** \$\_\_\_\_\_ **Current value of the portion you own?** \$\_\_\_\_\_

If you own or have more than one, list here:

4.2. Make: \_\_\_\_\_  
Model: \_\_\_\_\_  
Year: \_\_\_\_\_Other information:  
\_\_\_\_\_**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?** \$\_\_\_\_\_ **Current value of the portion you own?** \$\_\_\_\_\_

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here \_\_\_\_\_

\$7,300.00

Debtor 1 Anthony Wayne Silvious  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 3: Describe Your Personal and Household Items****Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**6. Household goods and furnishings***Examples:* Major appliances, furniture, linens, china, kitchenware No Yes. Describe..... Bedroom, living room, kitchen items (J) (\$5,500)

\$5,500.00

**7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No Yes. Describe..... Three televisions (J) (\$500)

\$500.00

**8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe.....

\$

**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe.....

\$

**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe..... 30-06 rifle, two shotguns, 22 cal. pistol (H)

\$1,500.00

**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe..... Clothing (J)

\$200.00

**12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe.....

Wedding bands (J - \$125); Two "Mother's" rings (W - \$150)

\$275.00

**13. Non-farm animals***Examples:* Dogs, cats, birds, horses No Yes. Describe.....

Pet dog

\$50.00

**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information.....

\$

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here** →

\$8,025.00

Debtor 1 Anthony Wayne Silvius  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes.....

Cash: ..... \$100.00

**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes.....

Institution name:

17.1. Checking account:	<u>Sonabank - xxxx4082 - (J)</u>	\$397.00
17.2. Checking account:	<u>SonaBank - xxxx3579 (W and legal ward) - SSDI and SSI only</u>	\$110.00
17.3. Savings account:	_____	\$_____
17.4. Savings account:	_____	\$_____
17.5. Certificates of deposit:	_____	\$_____
17.6. Other financial account:	_____	\$_____
17.7. Other financial account:	_____	\$_____
17.8. Other financial account:	_____	\$_____
17.9. Other financial account:	_____	\$_____

**18. Bonds, mutual funds, or publicly traded stocks***Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes.....

Institution or issuer name:

_____	\$_____
_____	\$_____
_____	\$_____

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture** No Yes. Give specific information about them. ....

Name of entity:

% of ownership:

_____	_____ %	\$_____
_____	_____ %	\$_____
_____	_____ %	\$_____

Debtor 1 Anthony Wayne Silvious  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

 No Yes. Give specific information about them. ....

Issuer name:

\_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

 No Yes. List each account separately.. Type of account: Institution name:

401(k) or similar plan: \_\_\_\_\_ \$ \_\_\_\_\_  
 Pension plan: \_\_\_\_\_ \$ \_\_\_\_\_  
 IRA: \_\_\_\_\_ \$ \_\_\_\_\_  
 Retirement account: \_\_\_\_\_ \$ \_\_\_\_\_  
 Keogh: \_\_\_\_\_ \$ \_\_\_\_\_  
 Additional account: \_\_\_\_\_ \$ \_\_\_\_\_  
 Additional account: \_\_\_\_\_ \$ \_\_\_\_\_

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

 No Yes.....

Institution name or individual:

Electric: \_\_\_\_\_ \$ \_\_\_\_\_  
 Gas: \_\_\_\_\_ \$ \_\_\_\_\_  
 Heating oil: \_\_\_\_\_ \$ \_\_\_\_\_  
 Security deposit on rental unit: \_\_\_\_\_ \$ \_\_\_\_\_  
 Prepaid rent: \_\_\_\_\_ \$ \_\_\_\_\_  
 Telephone: \_\_\_\_\_ \$ \_\_\_\_\_  
 Water: \_\_\_\_\_ \$ \_\_\_\_\_  
 Rented furniture: \_\_\_\_\_ \$ \_\_\_\_\_  
 Other: \_\_\_\_\_ \$ \_\_\_\_\_

**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)** No Yes.....

Issuer name and description:

\_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

Debtor 1 Anthony Wayne Silvious  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes ..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

\_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit** No Yes. Give specific information about them... \_\_\_\_\_ \$ \_\_\_\_\_**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

 No Yes. Give specific information about them... \_\_\_\_\_ \$ \_\_\_\_\_**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

 No Yes. Give specific information about them... \_\_\_\_\_ \$ \_\_\_\_\_**Money or property owed to you?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you** No Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

\_\_\_\_\_

Federal: \$ \_\_\_\_\_  
 State: \$ \_\_\_\_\_  
 Local: \$ \_\_\_\_\_

**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

 No Yes. Give specific information. ....

\_\_\_\_\_

Alimony: \$ \_\_\_\_\_  
 Maintenance: \$ \_\_\_\_\_  
 Support: \$ \_\_\_\_\_  
 Divorce settlement: \$ \_\_\_\_\_  
 Property settlement: \$ \_\_\_\_\_

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information. ....

\_\_\_\_\_ \$ \_\_\_\_\_

Debtor 1 Anthony Wayne Silvious  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. ....Company name: See Attachment 2 Beneficiary: Wife Surrender or refund value: \$9,575.01Company name: See Attachment 3 Beneficiary: Husband Surrender or refund value: \$4,307.95Company name:   Beneficiary:   Surrender or refund value: \$ **32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information. ....   \$  **33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim. ....   \$  **34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim. .... See Attachment 4   \$ 7,310.00**35. Any financial assets you did not already list** No Yes. Give specific information. ....   \$  **36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here** ..... → \$21,799.96**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned** No Yes. Describe .....   \$  **39. Office equipment, furnishings, and supplies***Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No Yes. Describe .....   \$

Debtor 1 **Anthony Wayne Silvious**

Case number (if known) \_\_\_\_\_

**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade** No Yes. Describe..... Mechanics tools - hand wrenches,, pneumatic wrench, old compressor, pliers, screwdrivers, sockets, ratchets - used in profession (H) \$800.00**41. Inventory** No Yes. Describe..... \$\_\_\_\_\_**42. Interests in partnerships or joint ventures** No Yes. Describe..... Name of entity: % of ownership:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_\$\_\_\_\_\_  
\$\_\_\_\_\_  
\$\_\_\_\_\_**43. Customer lists, mailing lists, or other compilations** No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No  
 Yes. Describe..... \$\_\_\_\_\_**44. Any business-related property you did not already list** No Yes. Give specific information .....  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\$\_\_\_\_\_  
\$\_\_\_\_\_**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here** \$800.00**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.****46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?** No. Go to Part 7.  
 Yes. Go to line 47.**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.**47. Farm animals**

Examples: Livestock, poultry, farm-raised fish

 No  
 Yes..... \$\_\_\_\_\_

Debtor 1 **Anthony Wayne Silvious**

Case number (if known) \_\_\_\_\_

**48. Crops—either growing or harvested**

No

Yes. Give specific information. ....

\$ \_\_\_\_\_

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

No

Yes.....

\$ \_\_\_\_\_

**50. Farm and fishing supplies, chemicals, and feed**

No

Yes.....

\$ \_\_\_\_\_

**51. Any farm- and commercial fishing-related property you did not already list**

No

Yes. Give specific information. ....

\$ \_\_\_\_\_

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here** → \$0.00

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

No

Yes. Give specific information. ....

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**54. Add the dollar value of all of your entries from Part 7. Write that number here** → \$ \_\_\_\_\_

**Part 8: List the Totals of Each Part of this Form**

**55. Part 1: Total real estate, line 2** → \$76,100.00

**56. Part 2: Total vehicles, line 5** \$7,300.00

**57. Part 3: Total personal and household items, line 15** \$8,025.00

**58. Part 4: Total financial assets, line 36** \$21,799.96

**59. Part 5: Total business-related property, line 45** \$800.00

**60. Part 6: Total farm- and fishing-related property, line 52** \$0.00

**61. Part 7: Total other property not listed, line 54** + \$0.00

**62. Total personal property.** Add lines 56 through 61. .... \$37,924.96 Copy personal property total → + \$37,924.96

**63. Total of all property on Schedule A/B.** Add line 55 + line 62. .... \$114,024.96

**Attachment  
Debtor: Anthony Wayne Silvious Case No:**

**Attachment 1: Additional Cars, Vans, Trucks, Tractors, Sport Utility Vehicles, and Motorcycles**

Make: Chevrolet

Model: Uplander # 1

Year: 2008

Approximate Mileage: 179,000

Parties with an Interest in the Property: Debtor 1 Only

Current Value of the Property: \$2,000.00

Current Value of Debtor's Ownership Interest: \$2,000.00

Personal Property vehicle other RTE is filled, Other Information: Fair shape - collateral for OneMain loan # 9008

**Attachment 2**

TransAmerica Life Insurance (3 policies) (H)

**Attachment 3**

TransAmerica Life Insurance (3 policies) (W)

**Attachment 4**

Potential inheritance (H - \$1.00)); Potential inheritance (W - \$1.00); Accrued portion of 2019 federal and state income tax refunds NOT attributable to EIC and/or CTC (J) (\$1,190)); Accrued portion of 2019 federal and state income tax refunds attributable to EIC and/or CTC (J) (\$6,118)

## Fill in this information to identify your case:

Debtor 1	<u>Anthony Wayne Silvious</u>	
	First Name	Middle Name
	Last Name	
Debtor 2	<u>Debra Sue Silvious</u>	
(Spouse, if filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the: <u>Western District of Virginia</u>		
Case number (If known) _____		

Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

## Part 1: Identify the Property You Claim as Exempt

## 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption.	
Brief description: <u>Former residence</u> Line from <i>Schedule A/B</i> : <u>1.0</u>	<u>\$76,100.00</u>	<input checked="" type="checkbox"/> \$ <u>1.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>CV § 34-4</u>
Brief description: <u>2008 Chevy Uplander Van # 2 (J)</u> Line from <i>Schedule A/B</i> : <u>3.2</u>	<u>\$3,500.00</u>	<input checked="" type="checkbox"/> \$ <u>1,226.27</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>CV § 34-26(8)</u>
Brief description: <u>1988 Ford (H)</u> Line from <i>Schedule A/B</i> : <u>3.3</u>	<u>\$500.00</u>	<input checked="" type="checkbox"/> \$ <u>500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>CV § 34-26(8)</u>

## 3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

Debtor 1 Anthony Wayne Silvious  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

## Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: 1990 Chevrolet (J) Line from Schedule A/B: 3.4	\$800.00	<input checked="" type="checkbox"/> \$ 800.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-26(8)
Brief description: Household goods (J) Line from Schedule A/B: 6	\$5,500.00	<input checked="" type="checkbox"/> \$ 5,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-26(4a)
Brief description: Firearms (H) Line from Schedule A/B: 10	\$1,500.00	<input checked="" type="checkbox"/> \$ 1,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-26(4b)
Brief description: Clothing (J) Line from Schedule A/B: 11	\$200.00	<input checked="" type="checkbox"/> \$ 200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-26(4)
Brief description: Wedding bands (J) Line from Schedule A/B: 12	\$125.00	<input checked="" type="checkbox"/> \$ 125.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-26(1a)
Brief description: Two "Mother's" rings (W) Line from Schedule A/B: 12	\$150.00	<input checked="" type="checkbox"/> \$ 150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-4
Brief description: Cash on hand (J) Line from Schedule A/B: 16	\$100.00	<input checked="" type="checkbox"/> \$ 100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-4
Brief description: Sonabank-4082 checking acct (J) Line from Schedule A/B: 17.1	\$397.00	<input checked="" type="checkbox"/> \$ 397.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-4
Brief description: Mechanics tools (H) Line from Schedule A/B: 40	\$800.00	<input checked="" type="checkbox"/> \$ 800.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-26(7)
Brief description: Potential inheritance (H - \$1.00) Line from Schedule A/B: 34	\$1.00	<input checked="" type="checkbox"/> \$ 1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-4
Brief description: Potential inheritance (W - \$1.00) Line from Schedule A/B: 34	\$1.00	<input checked="" type="checkbox"/> \$ 1.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-4
Brief description: Non-EIC/CTC accrued tax refunds (J) Line from Schedule A/B: 34	\$1,190.00	<input checked="" type="checkbox"/> \$ 1,190.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-4

Debtor 1 Anthony Wayne Silvious  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

## Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: SonaBank 3579 checking acct (W & Ward only)	\$110.00	<input checked="" type="checkbox"/> \$ 110.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	U.S.C. 42 § 407
Line from Schedule A/B: 17.2			
Brief description: Three televisions (J)	\$500.00	<input checked="" type="checkbox"/> \$ 500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-26(4a)
Line from Schedule A/B: 7			
Brief description: Pet dog	\$50.00	<input checked="" type="checkbox"/> \$ 50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-26(5)
Line from Schedule A/B: 13			
Brief description: Accrued EIC/CTC tax refunds (J)	\$6,118.00	<input checked="" type="checkbox"/> \$ 6,118.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 34-26(9)
Line from Schedule A/B: 34			
Brief description: Husband's life insurance (\$9,575.01)	\$9,575.01	<input checked="" type="checkbox"/> \$ 9,575.01 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 38.2-3122
Line from Schedule A/B: 31			
Brief description: Wife's life insurance (\$4,307.95)	\$4,307.95	<input checked="" type="checkbox"/> \$ 4,307.95 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	CV § 38.2-3122
Line from Schedule A/B: 31			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			
Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Line from Schedule A/B: _____			

## Fill in this information to identify your case:

Debtor 1	Anthony Wayne Silvious	
	First Name	Middle Name
Debtor 2	Debra Sue Silvious	
(Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the: <u>Western District of Virginia</u>		
Case number (If known)		

Check if this is an amended filing

## Official Form 106D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

## 1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

2.	List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.	Column A <b>Amount of claim</b> Do not deduct the value of collateral.	Column B <b>Value of collateral that supports this claim</b>	Column C <b>Unsecured portion</b> If any	
2.1	<p>Mr. Cooper Creditor's Name</p> <p>Attn: Bankruptcy Number Street</p> <p>8950 Cypress Waters Blvd.</p> <p>Coppell TX 75019 City State ZIP Code</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred 5/2008</p>	<p>Describe the property that secures the claim:</p> <p>Former residence</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p>	<p>\$86,868.00</p>	<p>\$76,100.00</p>	<p>\$10,768.00</p>
2.2	<p>OneMain Financial Creditor's Name</p> <p>Attn: Bankruptcy Number Street</p> <p>601 NW 2nd Street</p> <p>Evansville IN 47708 City State ZIP Code</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred 11/2017</p>	<p>Describe the property that secures the claim:</p> <p>2004 Chevrolet Impala with 220,000 miles., 2008 Chevrolet Uplander # 1 with 179,000 miles.</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p>	<p>\$8,911.49</p>	<p>\$2,500.00</p>	<p>\$6,411.49</p>
<p>Add the dollar value of your entries in Column A on this page. Write that number here: <u>\$95,779.49</u></p>					

Debtor 1 Anthony Wayne Silvius  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Additional Page****Part 1:****After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.**

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
--	--	--

2.3	<p><b>OneMain Financial</b> Creditor's Name <u>Attn: Bankruptcy</u> Number Street  <u>601 NW 2nd Street</u>  <u>Evansville</u> <u>IN</u> <u>47708</u> City State ZIP Code</p> <p><b>Describe the property that secures the claim:</b> 2008 Chevrolet Uplander # 2 with 96,000 miles.</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Date debt was incurred</b> <u>11/2017</u> <b>Last 4 digits of account number</b> <u>4 2 7 0</u></p>	\$2,273.73	\$3,500.00	\$0.00
2.4	<p>Creditor's Name  Number Street  City State ZIP Code</p> <p><b>Describe the property that secures the claim:</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Date debt was incurred</b> <b>Last 4 digits of account number</b></p>	\$	\$	\$
2.5	<p>Creditor's Name  Number Street  City State ZIP Code</p> <p><b>Describe the property that secures the claim:</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p><b>Date debt was incurred</b> <b>Last 4 digits of account number</b></p>	\$	\$	\$
<p><b>Add the dollar value of your entries in Column A on this page. Write that number here:</b> <u>\$2,273.73</u></p> <p><b>If this is the last page of your form, add the dollar value totals from all pages.</b> <b>Write that number here:</b> <u>\$98,053.22</u></p>				

Debtor 1 Anthony Wayne Silvius  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

OneMain Financial  
Name \_\_\_\_\_  
1066 Hisey Ave # 103  
Number Street \_\_\_\_\_

On which line in Part 1 did you enter the creditor? 2.2Last 4 digits of account number 9 0 0 8

Woodstock VA 22664  
City State ZIP Code \_\_\_\_\_

OneMain Financial  
Name \_\_\_\_\_  
1066 Hisey Ave # 103  
Number Street \_\_\_\_\_

On which line in Part 1 did you enter the creditor? 2.3Last 4 digits of account number 4 2 7 0

Woodstock VA 22664  
City State ZIP Code \_\_\_\_\_

Name \_\_\_\_\_  
Number Street \_\_\_\_\_  
City State ZIP Code \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_  
Number Street \_\_\_\_\_  
City State ZIP Code \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_  
Number Street \_\_\_\_\_  
City State ZIP Code \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_  
Number Street \_\_\_\_\_  
City State ZIP Code \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

## Fill in this information to identify your case:

Debtor 1	Anthony	Wayne	Silvious
	First Name	Middle Name	Last Name
Debtor 2	Debra	Sue	Silvious
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>Western District of Virginia</u>			
Case number (If known) _____			

Check if this is an amended filing

## Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

## 1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1	Last 4 digits of account number	\$	\$
Priority Creditor's Name			
Number Street			
City State ZIP Code			
<b>Who incurred the debt?</b> Check one.	<b>As of the date you file, the claim is:</b> Check all that apply.		
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<b>Type of PRIORITY unsecured claim:</b>		
<input type="checkbox"/> <b>Is the claim subject to offset?</b>	<input type="checkbox"/> Domestic support obligations		
<input type="checkbox"/> No	<input type="checkbox"/> Taxes and certain other debts you owe the government		
<input type="checkbox"/> Yes	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated		
<input type="checkbox"/> <b>Is the claim subject to offset?</b>	<input type="checkbox"/> Other. Specify _____		
2.2	Last 4 digits of account number	\$	\$
Priority Creditor's Name			
Number Street			
City State ZIP Code			
<b>Who incurred the debt?</b> Check one.	<b>As of the date you file, the claim is:</b> Check all that apply.		
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<b>Type of PRIORITY unsecured claim:</b>		
<input type="checkbox"/> <b>Is the claim subject to offset?</b>	<input type="checkbox"/> Domestic support obligations		
<input type="checkbox"/> No	<input type="checkbox"/> Taxes and certain other debts you owe the government		
<input type="checkbox"/> Yes	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated		
<input type="checkbox"/> <b>Is the claim subject to offset?</b>	<input type="checkbox"/> Other. Specify _____		

Debtor 1 Anthony Wayne  
First Name Anthony Middle Name Wayne Last Name

### Case n

Case number (if known)

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than four priority unsecured claims fill out the Continuation Page of Part 2.

4.1

**Capital One**  
Nonpriority Creditor's Name

Attn: Bankruptcy PO Box 30285  
Number Street

Salt Lake City UT 84130  
City State ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

**Last 4 digits of account number** 5 7 4 5 **\$320.00**

**When was the debt incurred?** 4/2018

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Charges

4.2

**Kohl's/Capital One**  
Nonpriority Creditor's Name

Attn: Bankruptcy PO Box 3120  
Number Street

Milwaukee WI 53201  
City State ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

**Last 4 digits of account number** 4 3 4 8 **\$600.00**

**When was the debt incurred?** 7/2018

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Charges

4.3

**LVNV Funding/Resurgent Capital**  
Nonpriority Creditor's Name

Attn: Bankruptcy PO Box 10497  
Number Street

Greenville SC 29603  
City State ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

**Last 4 digits of account number** 9 4 4 5 **\$418.00**

**When was the debt incurred?** 12/2018

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Factoring company account

**Part 2: Your NONPRIORITY Unsecured Claims –Continuation Page**

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

**Total claim**4.4 Ntelos Last 4 digits of account number 0 0 0 0 \$341.00

Nonpriority Creditor's Name

c/o McCarthy Burgess &amp; Wolff 26000 Cannon Road

Number Street

Bedford Heights OH 44146

City

State

ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

When was the debt incurred? 9/2016

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Cell phone service

4.5 Shenandoah Medical Imaging Last 4 digits of account number 3 8 0 6 \$90.00

Nonpriority Creditor's Name

c/o Creditors Collection Service PO Box 21504

Number Street

Roanoke VA 24018

City

State

ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

When was the debt incurred? 5/2013

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Medical Services

4.6 Shenandoah Memorial Hospital Last 4 digits of account number 8 9 9 2 \$562.00

Nonpriority Creditor's Name

c/o J.L. Walston &amp; Assoc. 2609 N. Duke St, Ste 501

Number Street

Durham NC 27704

City

State

ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

When was the debt incurred? 4/2017

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Medical Services

**Part 2: Your NONPRIORITY Unsecured Claims –Continuation Page**

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

**Total claim**4.7 Synchrony Bank - Care Credit Last 4 digits of account number 4 5 5 3

\$951.00

Nonpriority Creditor's Name

Attn: Bankruptcy PO Box 965064

Number Street

Orlando

FL 32896

City

State

ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

When was the debt incurred? 5/2018

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Charges

4.8 Synchrony Bank - JC Penney Last 4 digits of account number 6 1 5 2

\$682.00

Nonpriority Creditor's Name

Attn: Bankruptcy PO Box 965060

Number Street

Orlando

FL 32896

City

State

ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

When was the debt incurred? 6/2018

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Charges

4.9 Webbank - Fingerhut Last 4 digits of account number 1 2 6 0

\$1,764.00

Nonpriority Creditor's Name

Attn: Bankruptcy 6250 Ridgewood Road

Number Street

St Cloud

MN 56303

City

State

ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

When was the debt incurred? 3/2019

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Charges

**Part 2: Your NONPRIORITY Unsecured Claims –Continuation Page**

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

**Total claim**

4.10

Webbank - Fingerhut

Nonpriority Creditor's Name

Attn: Bankruptcy PO Box 1250

Number Street

St Cloud MN 56395  
City State ZIP Code**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

Last 4 digits of account number 9 7 7 3

\$1,384.00

When was the debt incurred? 2/2019

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Charges

4.11

Winchester Eye Surgery Center

Nonpriority Creditor's Name

c/o Valley Credit Service, Inc. PO Box 2162

Number Street

Hagerstown MD 21742  
City State ZIP Code**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

Last 4 digits of account number 0 0 3 3

\$100.00

When was the debt incurred? 5/2016

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Medical Services

4.12

Winchester Medical Valley Outreach

Nonpriority Creditor's Name

c/o Credit Control Corporation PO Box 120568

Number Street

Newport News VA 23612  
City State ZIP Code**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

Last 4 digits of account number \_\_\_\_\_

\$205.00

When was the debt incurred? 2014 &amp; 2018

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Medical Services

Debtor 1 Anthony Wayne Silvious  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Valley Health  
Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Attn: Bankruptcy  
Number Street \_\_\_\_\_Line 4.6 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

220 Campus Blvd, Ste 210 \_\_\_\_\_

Last 4 digits of account number 8 9 9 2

Winchester, Virginia 22601  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_Fingerhut  
Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Attn: Bankruptcy  
Number Street \_\_\_\_\_Line 4.9 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

PO Box 1250 \_\_\_\_\_

Last 4 digits of account number 1 2 6 0

Saint Cloud, MN 56395  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street \_\_\_\_\_

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street \_\_\_\_\_

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street \_\_\_\_\_

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street \_\_\_\_\_

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street \_\_\_\_\_

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Debtor 1

Anthony

First Name

Wayne

Middle Name

Silvious

Last Name

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159.  
Add the amounts for each type of unsecured claim.

		<b>Total claim</b>
<b>Total claims from Part 1</b>	<b>6a. Domestic support obligations</b>	6a. \$ _____
	<b>6b. Taxes and certain other debts you owe the government</b>	6b. \$ _____
	<b>6c. Claims for death or personal injury while you were intoxicated</b>	6c. \$ _____
	<b>6d. Other.</b> Add all other priority unsecured claims. Write that amount here.	6d. + \$ _____
	<b>6e. Total.</b> Add lines 6a through 6d.	6e. <span style="border: 1px solid black; padding: 5px;">\$ _____</span>
<b>Total claim</b>		
<b>Total claims from Part 2</b>	<b>6f. Student loans</b>	6f. \$ <u>0.00</u>
	<b>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</b>	6g. \$ <u>0.00</u>
	<b>6h. Debts to pension or profit-sharing plans, and other similar debts</b>	6h. \$ <u>0.00</u>
	<b>6i. Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ <u>7,417.00</u>
	<b>6j. Total.</b> Add lines 6f through 6i.	6j. <span style="border: 1px solid black; padding: 5px;">\$ <u>7,417.00</u></span>

Fill in this information to identify your case:

Debtor	<b>Anthony Wayne Silvious</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if filing)	<b>Debra Sue Silvious</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Western District of Virginia</b>			
Case number (if known) _____			

Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease			State what the contract or lease is for		
2.1	Name _____					
	Number	Street				
	City	State	ZIP Code			
2.2	Name _____					
	Number	Street				
	City	State	ZIP Code			
2.3	Name _____					
	Number	Street				
	City	State	ZIP Code			
2.4	Name _____					
	Number	Street				
	City	State	ZIP Code			
2.5	Name _____					
	Number	Street				
	City	State	ZIP Code			

Fill in this information to identify your case:

Debtor 1	<b>Anthony Wayne Silvius</b>		
	First Name	Middle Name	Last Name
Debtor 2	<b>Debra Sue Silvius</b>		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Western District of Virginia</b>			
Case number (If known) _____			

Check if this is an amended filing

Official Form 106H

**Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No  
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No  
 Yes. In which community state or territory did you live? \_\_\_\_\_. Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

**Column 1: Your codebtor**

**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.1

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G, line \_\_\_\_\_

3.2

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G, line \_\_\_\_\_

3.3

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G, line \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	<b>Anthony Wayne Silvious</b>		
	First Name	Middle Name	Last Name
Debtor 2	<b>Debra Sue Silvious</b>		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Western District of Virginia</b>			
Case number (If known) _____			

Check if this is:

An amended filing  
 A supplement showing post-petition chapter 13 income as of the following date:  
 MM / DD / YYYY

Official Form 106I

12/15

## Schedule I: Your Income

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed
Occupation	<u>Auto mechanic</u>	
Employer's name	<u>Wilkins Brothers Repair</u>	
Employer's address	Number Street _____ _____ _____	
	Number Street _____ _____ _____	
	City State ZIP Code _____	
City State ZIP Code _____		
How long employed there?	<u>35 years</u>	

### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. <u>\$2,318.32</u>	<u>\$0.00</u>
3. Estimate and list monthly overtime pay.	3. <u>+\$0.00</u>	<u>+\$0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. <u>\$2,318.32</u>	<u>\$0.00</u>

Debtor 1 **Anthony Wayne Silvius** Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

	<u>For Debtor 1</u>	<u>For Debtor 2 or non-filing spouse</u>
<b>Copy line 4 here .....</b>	→ 4. <u>\$2,318.32</u>	<u>\$0.00</u>
<b>5. List all payroll deductions:</b>		
5a. <b>Tax, Medicare, and Social Security deductions</b>	5a. <u>\$498.30</u>	<u>\$0.00</u>
5b. <b>Mandatory contributions for retirement plans</b>	5b. <u>\$0.00</u>	<u>\$0.00</u>
5c. <b>Voluntary contributions for retirement plans</b>	5c. <u>\$0.00</u>	<u>\$0.00</u>
5d. <b>Required repayments of retirement fund loans</b>	5d. <u>\$0.00</u>	<u>\$0.00</u>
5e. <b>Insurance</b>	5e. <u>\$0.00</u>	<u>\$0.00</u>
5f. <b>Domestic support obligations</b>	5f. <u>\$0.00</u>	<u>\$0.00</u>
5g. <b>Union dues</b>	5g. <u>\$0.00</u>	<u>\$0.00</u>
5h. <b>Other deductions. Specify:</b> _____	5h. <u>+ \$0.00</u>	<u>+ \$0.00</u>
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. <u>\$498.30</u>	<u>\$0.00</u>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7. <u>\$1,820.02</u>	<u>\$0.00</u>
<b>8. List all other income regularly received:</b>		
8a. <b>Net income from rental property and from operating a business, profession, or farm</b> Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. <u>\$0.00</u>	<u>\$0.00</u>
8b. <b>Interest and dividends</b>	8b. <u>\$0.00</u>	<u>\$0.00</u>
8c. <b>Family support payments that you, a non-filing spouse, or a dependent regularly receive</b> Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. <u>\$0.00</u>	<u>\$0.00</u>
8d. <b>Unemployment compensation</b>	8d. <u>\$0.00</u>	<u>\$0.00</u>
8e. <b>Social Security</b>	8e. <u>\$0.00</u>	<u>\$668.00</u>
8f. <b>Other government assistance that you regularly receive</b> Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: <u>Adoption subsidy for 18 year old daughter</u>	8f. <u>\$0.00</u>	<u>\$990.00</u>
8g. <b>Pension or retirement income</b>	8g. <u>\$0.00</u>	<u>\$0.00</u>
8h. <b>Other monthly income. Specify:</b> _____	8h. <u>+ \$0.00</u>	<u>+ \$0.00</u>
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. <u>\$0.00</u>	<u>\$1,658.00</u>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. <u>\$1,820.02</u>	<u>+ \$1,658.00</u> = <u>\$3,478.02</u>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		
		11. <u>+ \$0.00</u>
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies		12. <u>\$3,478.02</u>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b> <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____		
<b>Combined monthly income</b>		

Fill in this information to identify your case:

Debtor 1	<b>Anthony Wayne Silvious</b>	
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	<b>Debra Sue Silvious</b>	
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	<b>Western District of Virginia</b>	
Case number (If known)		

Check if this is:

An amended filing  
 A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.

Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

No

Do not list Debtor 1 and Debtor 2.

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

No  
 Yes

No  
 Yes

No  
 Yes

No  
 Yes

No  
 Yes

**Legal ward (grandson)**

**20**

**Legal ward (granddaughter)**

**20**

**Daughter**

**19**

**Daughter**

**18**

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

**Your expenses**

4. **\$600.00**

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4a. **\$0.00**

4b. **\$30.00**

4c. **\$0.00**

4d. **\$0.00**

Debtor 1 **Anthony Wayne Silvius**  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

<b>Your expenses</b>	
5. <b>Additional mortgage payments for your residence</b> , such as home equity loans	5. <b>\$0.00</b>
<b>6. Utilities:</b>	
6a. Electricity, heat, natural gas	6a. <b>\$300.00</b>
6b. Water, sewer, garbage collection	6b. <b>\$0.00</b>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. <b>\$450.00</b>
6d. Other. Specify: _____	6d. <b>\$0.00</b>
7. <b>Food and housekeeping supplies</b>	7. <b>\$1,170.00</b>
8. <b>Childcare and children's education costs</b>	8. <b>\$0.00</b>
9. <b>Clothing, laundry, and dry cleaning</b>	9. <b>\$120.00</b>
10. <b>Personal care products and services</b>	10. <b>\$35.00</b>
11. <b>Medical and dental expenses</b>	11. <b>\$25.00</b>
12. <b>Transportation</b> . Include gas, maintenance, bus or train fare. Do not include car payments.	12. <b>\$435.00</b>
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. <b>\$40.00</b>
14. <b>Charitable contributions and religious donations</b>	14. <b>\$100.00</b>
<b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. <b>\$275.00</b>
15b. Health insurance	15b. <b>\$0.00</b>
15c. Vehicle insurance	15c. <b>\$130.00</b>
15d. Other insurance. Specify: _____	15d. <b>\$0.00</b>
16. <b>Taxes</b> . Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. <b>\$0.00</b>
<b>17. Installment or lease payments:</b>	
17a. Car payments for Vehicle 1	17a. <b>\$269.71</b>
17b. Car payments for Vehicle 2	17b. <b>\$454.00</b>
17c. Other. Specify: _____	17c. <b>\$</b>
17d. Other. Specify: _____	17d. <b>\$</b>
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. <b>\$0.00</b>
19. <b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. <b>\$0.00</b>
<b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>	
20a. Mortgages on other property	20a. <b>\$0.00</b>
20b. Real estate taxes	20b. <b>\$0.00</b>
20c. Property, homeowner's, or renter's insurance	20c. <b>\$0.00</b>
20d. Maintenance, repair, and upkeep expenses	20d. <b>\$0.00</b>
20e. Homeowner's association or condominium dues	20e. <b>\$0.00</b>

Debtor 1 **Anthony Wayne Silvius**  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

21. Other. Specify: \_\_\_\_\_

21. **+\$0.00**

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22c. Add line 22a and 22b. The result is your monthly expenses.

**\$4,433.71**

**\$**

**\$4,433.71**

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. **\$3,478.02**

23b. Copy your monthly expenses from line 22 above.

23b. **-\$4,433.71**

23c. Subtract your monthly expenses from your monthly income.

The result is your monthly net income.

23c. **\$-955.69**

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1	<b>Anthony Wayne Silvious</b>	First Name	Middle Name	Last Name
Debtor 2	<b>Debra Sue Silvious</b>	(Spouse, if filing) First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>Western District of Virginia</b>				
Case number (If known)				

Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

#### Part 1: Summarize Your Assets

Your assets	
Value of what you own	
1. <i>Schedule A/B: Property</i> (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	\$ <u>76,100.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	\$ <u>37,924.96</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	\$ <u>114,024.96</u>

#### Part 2: Summarize Your Liabilities

Your liabilities	
Amount you owe	
2. <i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....	\$ <u>98,053.22</u>
3. <i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	\$ <u>0.00</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	\$ <u>7,417.00</u>
Your total liabilities	
	\$ <u>105,470.22</u>

#### Part 3: Summarize Your Income and Expenses

4. <i>Schedule I: Your Income</i> (Official Form 106I)	
Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	\$ <u>3,478.02</u>
5. <i>Schedule J: Your Expenses</i> (Official Form 106J)	
Copy your monthly expenses from line 22, Column A, of <i>Schedule J</i> .....	\$ <u>4,433.71</u>

Debtor 1

**Anthony Wayne Silvius**

First Name Middle Name

Last Name

Case number (if known) \_\_\_\_\_

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
 Yes

**7. What kind of debt do you have?**

**Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159.  
 **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

**\$3,308.32**

**9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

**Total claim**

**From Part 4 on *Schedule E/F*, copy the following:**

9a. Domestic support obligations (Copy line 6a.)

**\$0.00**

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

**\$0.00**

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

**\$0.00**

9d. Student loans. (Copy line 6f.)

**\$0.00**

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

**\$0.00**

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

**+ \$0.00**

9g. **Total.** Add lines 9a through 9f.

**\$0.00**

United States Bankruptcy Court  
WESTERN DISTRICT OF VIRGINIA  
HARRISONBURG DIVISION

**In re Anthony Wayne Silvius and Debra Sue Silvius**

Case No. \_\_\_\_\_

**Debtor**

Chapter 7 \_\_\_\_\_

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... **\$890.00**

Prior to the filing of this statement I have received ..... **\$890.00**

Balance Due ..... **\$0.00**

2. The source of the compensation paid to me was:

Debtor

Other (specify)

3. The source of compensation to be paid to me is:

Debtor

Other (specify)

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

- d. ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  
**Post § 341 Meeting matters; court appearances; adversary proceedings**

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

June 11, 2019  
Date

/s/Douglas W. Harold, Jr.  
Signature of Attorney

Douglas W. Harold, Jr., Attorney at Law.  
Name of law firm

**Fill in this information to identify your case:**

Debtor 1	<b><u>Anthony Wayne Silvious</u></b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b><u>Debra Sue Silvious</u></b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b><u>Western District of Virginia</u></b>			
Case number (If known)	_____		

Check if this is an amended filing

# Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

**Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?**

No  
 Yes. Name of person \_\_\_\_\_ . Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X** /s/Anthony Wayne Silvious

Signature of Debtor 1

/s/Debra Sue Silvius

Signature of Debtor 2

Date 06/11/2019

Date 06/11/2019  
MM / DD / YYYY

UNITED STATES BANKRUPTCY COURT  
Western District of Virginia  
Harrisonburg Division

In re: Anthony Wayne Silvious and Debra Sue Silvious  
Debtors

Case No. \_\_\_\_\_  
Chapter 7 \_\_\_\_\_

## VERIFICATION OF CREDITOR MATRIX

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under penalty of perjury that the attached Master Mailing List of creditors is complete, correct and consistent with the debtor's schedules pursuant to Local Bankruptcy Rules and I/we assume all responsibility for errors and omissions.

Dated: June 11, 2019

Signed: /s/Anthony Wayne Silvious \_\_\_\_\_

Dated: June 11, 2019

Signed: /s/Debra Sue Silvious \_\_\_\_\_

Capital One  
Attn: Bankruptcy  
PO Box 30285  
Salt Lake City, UT 84130

Fingerhut  
Attn: Bankruptcy  
PO Box 1250  
Saint Cloud, MN 56395

Kohl's/Capital One  
Attn: Bankruptcy  
PO Box 3120  
Milwaukee, WI 53201

LVNV Funding/Resurgent Capital  
Attn: Bankruptcy  
PO Box 10497  
Greenville, SC 29603

Mr. Cooper  
Attn: Bankruptcy  
8950 Cypress Waters Blvd.  
Coppell, TX 75019

Ntelos  
c/o McCarthy Burgess & Wolff  
26000 Cannon Road  
Bedford Heights, OH 44146

OneMain Financial  
Attn: Bankruptcy  
601 NW 2nd Street  
Evansville, IN 47708

OneMain Financial  
1066 Hisey Ave # 103  
Woodstock, VA 22664

Shenandoah Medical Imaging  
c/o Creditors Collection Service  
PO Box 21504  
Roanoke, VA 24018

Shenandoah Memorial Hospital  
c/o J.L. Walston & Assoc.  
2609 N. Duke St, Ste 501  
Durham, NC 27704

Synchrony Bank - Care Credit  
Attn: Bankruptcy  
PO Box 965064  
Orlando, FL 32896

Synchrony Bank - JC Penney  
Attn: Bankruptcy  
PO Box 965060  
Orlando, FL 32896

Valley Health  
Attn: Bankruptcy  
220 Campus Blvd, Ste 210  
Winchester, VA 22601

Webbank - Fingerhut  
Attn: Bankruptcy  
6250 Ridgewood Road  
St Cloud, MN 56303

Webbank - Fingerhut  
Attn: Bankruptcy  
PO Box 1250  
St Cloud, MN 56395

Winchester Eye Surgery Center  
c/o Valley Credit Service, Inc.  
PO Box 2162  
Hagerstown, MD 21742

Winchester Medical Valley Outreach  
c/o Credit Control Corporation  
PO Box 120568  
Newport News, VA 23612